

Application for Permanent Water Right Transfer

Part 1 of 5 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.
 For questions, please call (503) 986-0900, and ask for Transfer Section. RECEIVED

Check all items included with this application. (N/A = Not Applicable)

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- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801. \$5,110
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 4 List them here: Certificates 33312, 48389, 56242, 56243**
 Please include a separate Part 5 for each water right. (See instructions on page 6)

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Evidence of Use Form not enclosed or incomplete
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> Part _____ is incomplete

Other/Explanation _____

Staff: _____ 503-986-0_____ Date: ____/____/____

Part 2 of 5 – Transfer Application Map

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Your transfer application will be returned if any of the map requirements listed below are not met.

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Christopher James Ray and Anna R. Ray		PHONE NO. 541-446-3265	ADDITIONAL CONTACT NO. 208-880-6344
ADDRESS 6144 Molthan Ranch Road			FAX NO.
CITY Ironside	STATE OR	ZIP 97908	E-MAIL chrisray@raybrothers.net
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME Nancy L. Rorick, Nancy Rorick Consulting		PHONE NO. 541-519-3644	ADDITIONAL CONTACT NO.
ADDRESS 645 L Loop			FAX NO.
CITY Baker City	STATE OR	ZIP 97814	E-MAIL nrorick@nlr-water.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this transfer application, and why:

The applicant is changing the POU so that he can add pivots. He is also adding a Point of Diversion so that he can withdraw water for all surface water rights form one POD.

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check One Box

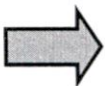
- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

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By my signature below, I confirm that I understand:

- Prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Malheur Enterprise.
- Amendments to the application may only be made in response to the Department’s Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).

I (we) affirm that the information contained in this application is true and accurate.



Christopher James Ray

Applicant signature

Anna R. Ray

Applicant signature

Christopher James Ray
Print Name (and Title if applicable)

3/17/2020
Date

Anne R. Ray
Print Name (and Title if applicable)

3/17/2020
Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No

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Check the following boxes that apply:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.
- Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see: https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

RECEIVING LANDOWNER NAME n/a			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.	RECEIVED
CITY	STATE	ZIP	E-MAIL	APR 06 2020

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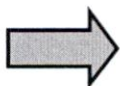
Describe any special ownership circumstances here: _____

- Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: **Complete and attach Supplemental Form D.**)

IRRIGATION DISTRICT NAME n/a	ADDRESS		
CITY	STATE	ZIP	

- Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME n/a	ADDRESS		
CITY	STATE	ZIP	



To meet State Land Use Consistency Requirements, you must list all county, city, municipal corporation, or tribal governments within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME Malheur County	ADDRESS 251 B Street West		
CITY VALE	STATE OR	ZIP 97918	

ENTITY NAME	ADDRESS		
CITY	STATE	ZIP	

Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 33312

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Description of Water Delivery System

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System capacity: 1.31 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from MALH 41 to the place of use as shown on the transfer application maps.**

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well No. 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MALH 41	14 S	39 E	32	NE NE	4500	Well located 525 feet west and 1300 feet south from the NE corner Section 32.
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- | | |
|--|---|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

Will all of the proposed changes affect the entire water right?

- Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the water right to be changed.

Please use and attach additional pages of Table 2 as needed.
See page 6 for instructions.

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer Staff.

Table 2. Description of Changes to Water Right Certificate # 33312

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands)										PROPOSED (the "to" or "on" lands)									
The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										The listing as it would appear AFTER PROPOSED CHANGES are made.									
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
										14	S	E	NW	4300		0.3		Well 2	6/18/1962
										14	S	E	SW	4300		0.1		Well 2	6/18/1962
										14	S	E	NE	4300		27.7		Well 2	6/18/1962
										14	S	E	NE	3401		5		Well 2	6/18/1962
										14	S	E	NW	4500		23.9		Well 2	6/18/1962
										14	S	E	SW	4500		20.3		Well 2	6/18/1962
										14	S	E	SE	4502		15		Well 2	6/18/1962
										14	S	E	SE	4500		12.4		Well 2	6/18/1962
TOTAL ACRES:										TOTAL ACRES:									
										104.7									

Additional remarks: _____

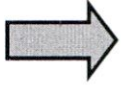
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For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the “from” or the “to” lands? Yes No

If YES, list the certificate, water use permit, or ground water registration numbers: **Certificates 48389, 56242, 56243.**



Pursuant to ORS 540.510, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # n/a;
Surface water primary Certificate # N/A.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # N/A

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department’s web page at:
http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
Well 2	yes	MALH 41	998 ft							

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 48389

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Description of Water Delivery System

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System capacity: **1.6** cubic feet per second (cfs) **OR**
 _____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from Willow Creek at POD1 to the POU as shown on the application maps.**

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
POD 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		14 S	39 E	28	SW NW	4500	2670 feet North and 980 feet East from the SW Corner, Section 28
POD 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		14 S	39 E	32	NW SE	4900	540 feet South and 1400 feet West from the E ¼ Corner, Section 32
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- Place of Use (POU)
- Character of Use (USE)
- Point of Diversion (POD)
- Additional Point of Diversion (APOD)
- Surface Water POD to Ground Water POA (SW/GW)
- Supplemental Use to Primary Use (S to P)
- Point of Appropriation/Well (POA)
- Additional Point of Appropriation (APOA)
- Substitution (SUB)
- Government Action POD (GOV)

Will all of the proposed changes affect the entire water right?

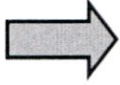
- Yes** Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No** Complete all of Table 2 to describe the portion of the water right to be changed.

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For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands? Yes No

If YES, list the certificate, water use permit, or ground water registration numbers: **Certificates 33312, 56242 and 56243.**



Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # n/a;
Surface water primary Certificate # N/A.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # N/A

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department's web page at:
http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
n/a										

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 56242

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Description of Water Delivery System

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System capacity: 0.38 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from Willow Creek at POD 2 to the POU as shown on the application maps.**

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
POD 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		14 S	39 E	28	SW NW	4500	2650 feet North and 915 feet East from SW corner Section 28.
POD 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		14 S	39 E	32	NW SE	4900	540 feet South and 1400 feet West from the E ¼ Corner, Section 32
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- Place of Use (POU)
- Character of Use (USE)
- Point of Diversion (POD)
- Additional Point of Diversion (APOD)
- Surface Water POD to Ground Water POA (SW/GW)
- Supplemental Use to Primary Use (S to P)
- Point of Appropriation/Well (POA)
- Additional Point of Appropriation (APOA)
- Substitution (SUB)
- Government Action POD (GOV)

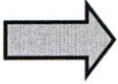
Will all of the proposed changes affect the entire water right?

- Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the water right to be changed.

For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the “from” or the “to” lands? Yes No

If YES, list the certificate, water use permit, or ground water registration numbers: **27102.**



Pursuant to ORS 540.510, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # **N/A**;
Surface water primary Certificate # **N/A**.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

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Identify the primary certificate to be cancelled. Certificate # **N/A**

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

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http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

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Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
N/A										

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

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CERTIFICATE # 56243

APR 06 2020

Description of Water Delivery System

System capacity: **0.34 (portion of right transferred)** cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from well 1 to the POU as shown on the application maps.**

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MALH 43	14 S	39 E	28	SW SW	4500	1050 feet East from SW corner Section 28.
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- Place of Use (POU)
- Character of Use (USE)
- Point of Diversion (POD)
- Additional Point of Diversion (APOD)
- Surface Water POD to Ground Water POA (SW/GW)
- Supplemental Use to Primary Use (S to P)
- Point of Appropriation/Well (POA)
- Additional Point of Appropriation (APOA)
- Substitution (SUB)
- Government Action POD (GOV)

Will all of the proposed changes affect the entire water right?

- Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the water right to be changed.

Please use and attach additional pages of Table 2 as needed.
See page 6 for instructions.

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer Staff.

Table 2. Description of Changes to Water Right Certificate # 56243

List the change proposed for the acreage in each ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands)										PROPOSED (the "to" or "on" lands)									
The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										The listing as it would appear AFTER PROPOSED CHANGES are made.									
Twp	Rng	Sec	¼	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Gvt Lot/DLC	Tax Lot	Acres	Rng	Sec	¼	Tax Lot	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date	
14	S	39	E 28 SW	9.3	Suppl. Irrig.	Well 1	4/6/1977		4300	0.1	14	S	39	E 27 NW	SW	4300	Well 1	4/6/1977	
14	S	39	E 28 NE	2.1	Suppl. Irrig.	Well 1	4/6/1977		4300	27	14	S	39	E 28 NE	SE	4300	Well 1	4/6/1977	
14	S	39	E 28 SE	16.8	Suppl. Irrig.	Well 1	4/6/1977		3401	4.7	14	S	39	E 28 NE	SE	3401	Well 1	4/6/1977	
14	S	39	E 28 NW	36.6	Suppl. Irrig.	Well 1	4/6/1977		4500	23	14	S	39	E 28 NW	SE	4500	Well 1	4/6/1977	
14	S	39	E 28 SW	20	Suppl. Irrig.	Well 1	4/6/1977		4500	19.5	14	S	39	E 28 SW	SE	4500	Well 1	4/6/1977	
14	S	39	E 33 NW	1.2	Suppl. Irrig.	Well 1	4/6/1977		4500	11.9	14	S	39	E 28 SE	SE	4500	Well 1	4/6/1977	
14	S	39	E 33 NE	14.8	Suppl. Irrig.	Well 1	4/6/1977		4502	14.6	14	S	39	E 28 SE	SE	4502	Well 1	4/6/1977	
TOTAL ACRES: 100.8										TOTAL ACRES: 100.8									

Additional remarks: _____

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For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the “from” or the “to” lands? Yes No

If YES, list the certificate, water use permit, or ground water registration numbers: **Certificates 33312, 48389, and 56243.**



Pursuant to ORS 540.510, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # n/a;
Surface water primary Certificate # N/A.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # N/A

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department’s web page at:

http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-_____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
Well 1	yes	MALH 43	594 ft	12 inch	0-300 ft		32-296 ft	34 ft	Sand & gravel	

13404

Well 1

STATE ENGINEER
Salem, Oregon

Malh
043

Well Record

malh 043

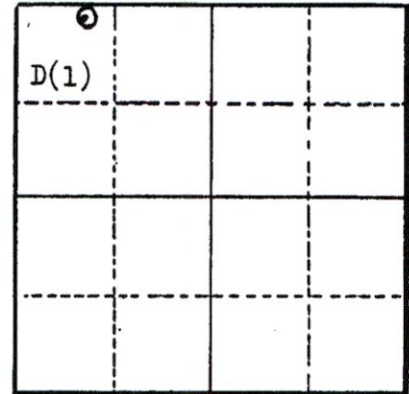
STATE WELL NO. 14/39-33D(1)
COUNTY Malheur
APPLICATION NO. U-876

OWNER: Ray Duncan MAILING ADDRESS: Box 554

LOCATION OF WELL: Owner's No. 3 CITY AND STATE: Ontario, Oregon

NW 1/4 NW 1/4 Sec. 33 T. 14 N. S., R. 39 E., W.M.

Bearing and distance from section or subdivision corner S 89° 50' E. 3625' from S 1/4 corner, Sec. 29



Section

Altitude at well

TYPE OF WELL: Drilled Date Constructed July-Sept '55

Depth drilled 584 Depth cased 296

CASING RECORD:

12 inch, set from 0 to 300 feet

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FINISH:

Perforations from 32 to 296 feet (8 holes every 8 inches)

AQUIFERS:

WATER LEVEL:

34 feet below land surface

PUMPING EQUIPMENT: Type H.P. Capacity G.P.M.

WELL TESTS:

Drawdown 121 ft. after 9 hours pumping 180 G.P.M.

Drawdown ft. after hours G.P.M.

USE OF WATER None Temp. °F. 19

SOURCE OF INFORMATION Well report in U-876

DRILLER or DIGGER Max Holloway

ADDITIONAL DATA:

Log Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

STATE ENGINEER
Salem, Oregon

111011 043
Malh 043

State Well No. 14/39-33D(1)
County Malheur
Application No. U-876

Well Log

Owner: Ray Duncan Owner's No. 3

Driller: Max Holloway Date Drilled July-Sept. 1955

CHARACTER OF MATERIAL	(Feet below 'and surface)		Thickness (feet)
	From	To	
Soil	0	4	4
Gravel, cemented	4	12	8
Boulders	12	20	8
Clay, yellow	20	40	20
Sand and gravel, water bearing	40	46	6
Clay with gravel	46	86	40
Gravel, loose, some water	86	90	4
Clay, very hard	90	120	30
Sand and gravel	120	125	5
Sandrock	125	140	15
Sand, loose	140	150	10
Clay, brown, with rock	150	180	30
Sandrock	180	190	10
Clay, yellow	190	220	30
Clay, crumbly	220	260	40
Clay, sandy	260	280	20
Gravel, clay, and sand mixed	280	300	20
Gravel and sand	300	305	5
Clay, hard	305	350	45
Gravel streak	350	355	5
Clay, hard, gravel	355	375	20
Gravel, sandy	375	380	5
Clay, hard	380	410	30
Gravel streak	410	413	3

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Well 2

STATE ENGINEER
Salem, Oregon

REGISTRATION WELL

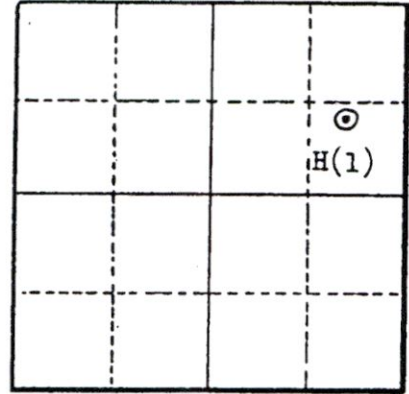
Well Record

STATE WELL NO. 14/39-32H(1)
COUNTY Malheur
APPLICATION NO. U-840

OWNER: Ray Duncan Mailing Address: Box 554

LOCATION OF WELL: Owner's No. 2 City and State: Ontario, Oregon

SE 1/4 NE 1/4 Sec. 32 T. 14 N. S., R. 39 E., W.M.
Bearing and distance from section or subdivision
corner 23 chains S. and 11 chains W. from
NE corner of Sec. 32, T. 14 S., R. 39 E.



Section 32

Altitude at well

TYPE OF WELL: Date Constructed

Depth drilled 998 Depth cased

CASING RECORD:

12 inch

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FINISH:

AQUIFERS:

WATER LEVEL:

165

PUMPING EQUIPMENT: Type H.P. 60
Capacity G.P.M.

WELL TESTS:

Drawdown 165 ft. after 6 hours 700 G.P.M.
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. 76 °F. October 2, 1955

SOURCE OF INFORMATION U-840

DRILLER or DIGGER Holloway Drilling Co., Ontario Oregon

ADDITIONAL DATA:

Log Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

Application for Water Right Transfer

Evidence of Use Affidavit



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss
 County of MALHEUR)

I, CHRISTOPHER JAMES RAY, in my capacity as OWNER,
 mailing address 6144 MOLTHA RANCH ROAD

telephone number (541)880-6344, being first duly sworn depose and say:

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1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the **entire** place of use for Certificate # 56243; **OR**

My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # _____ has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____ (For Historic POD/POA Transfers)

(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): _____

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

[Signature]
Signature of Affiant

3/31/2020
Date

[Signature]

3/31/2020

Signed and sworn to (or affirmed) before me this 31st day of March, 2020.

[Signature]
Notary Public for Oregon



My Commission Expires: 6-20-23

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input checked="" type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph <p style="text-align: center;">RECEIVED APR 06 2020 OWRD</p>	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number



Photo shows crop on the Place of Use in 2019.

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CCC-902 (04-15-2019)	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	Program Year 2019
FARM OPERATING PLAN FOR PAYMENT ELIGIBILITY 2009 and Subsequent Program Years		

For "actively engaged in farming" and other payment eligibility and limitation determinations.

This form is to be completed by, or on behalf of, the individual or legal entity identified in Part A that is seeking benefits from the Farm Service Agency (FSA) under one or more programs that are subject to the requirements of 7 CFR Part 1400. This form collects farming and other information about the individual or legal entity that receives program benefits directly using the tax identification number identified in Part A. This form also collects information about the members of legal entities. Payment eligibility is based upon the contribution level of certain inputs to a farming operation such as land, capital, equipment, labor, and management. The information on this form will be used by FSA to determine payment eligibility and limitation of payments by direct attribution.

Part A - General Farming Operation Information

Producer's Name CHRISTOPHER J RAY	Tax ID Number and ID Type (last 4 digits) 7521 5	Business Type Individual
--------------------------------------	---	-----------------------------

Part B - Capital Information *Note: Does not include capital contributed by members of general partnerships or S/C corporations (applicable to all business types)*

Does the producer provide capital to this farming operation?	Yes
What percent of capital is contributed by the producer to this farming operation from all sources?	100 %
Indicate the source of all farming capital for the producer. (Check all that apply)	
<input checked="" type="checkbox"/> Non-borrowed capital <input checked="" type="checkbox"/> Commercial loans/credit <input type="checkbox"/> Other/Additional	
<input type="checkbox"/> FSA program payments <input type="checkbox"/> Private Loans/credit	

Was such a loan acquired from, co-signed by, secured by, or guaranteed by an individual or entity who:	
+ shares in the production or proceeds of the production from this farming operation?	No
+ is a landowner or landlord with an interest in this farming operation?	No

Part C - Land Information *(applicable to all business types)*

Does the producer contribute land to the farming operation?	Yes
---	-----

Does this farming operation own ANY land?	Yes
---	-----

State	Administrative County	Farm Serial Number	Tract Number	Farmland Acres	Cropland Acres	Farmland Acres Not Leased	Is any land leased to another producer?
OR	Malheur	3556	3174	241.34	182.2	241.34	No
OR	Malheur	4257	2320	478.57	272.25	478.57	No
OR	Malheur	4499	2459	452.49	278.14	452.49	No
OR	Malheur	4651	3867	873.84	424.51	873.84	No
OR	Malheur	4858	4132	41.99	0.0	41.99	No
OR	Malheur	5382	4942	507.9	0.0	507.9	No
OR	Malheur	5610	5335	141.56	40.29	141.56	No
OR	Malheur	6299	6186	7.1	0.0	7.1	No

Does this farming operation lease land from another producer?	Yes
---	-----

State	Administrative County	Farm Serial Number	Tract Number	Name of Person Land is Leased From	Leased Acres	Type of Acres	Type of Lease	Crop Share	Interest in the Land is same as last year?
OR	Malheur	3556	3173	CHARLAN A HEID EDWIN G HEID	5.8	Cropland	Cash		Yes
OR	Malheur	4692	3897	DANIEL DANENS FAMILY TRUST	380.54	Cropland	Cash		Yes
OR	Malheur			DANIEL DANENS FAMILY TRUST	4398.14	Farmland	Cash		Yes
OR	Malheur	5365	4845	JOSHUA RAY	135.53	Farmland	Cash		Yes
OR	Malheur	5725	5455	HUNTING AND GRAZING ASSOCIATION LLC	664.7	Farmland	Cash		Yes
OR	Malheur	5974	5766	DAVIS LAND & LIVESTOCK CO	11979.97	Farmland	Cash		Yes

Does this farming operation lease land to another producer?	No
---	----

Part D - Custom Services *(applicable to all business types)*

Will custom services, such as harvesting, spraying, fertilization, tillage, seeding, etc., be utilized for this farming operation?	No
--	----

Part E - Equipment Information *Note: Does not include equipment contributed by members of general partnerships or S/C corporations (applicable to all business types)*

Does the producer provide equipment to this farming operation?	Yes
What percent of the equipment does the producer contribute to this farming operation?	100 %
Does the producer own any equipment contributed to this farming operation?	Yes

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Oregon
Malheur

U.S. Department of Agriculture
Farm Service Agency
Abbreviated 156 Farm Record

FARM: 4692
Prepared: 11/19/19 8:47 AM
Crop Year: 2020
Page: 1 of 1

Report ID: FSA-156EZ

DISCLAIMER: This is data extracted from the web farm database. Because of potential messaging failures in MIDAS, this data is not guaranteed to be an accurate and complete representation of data contained in the MIDAS system, which is the system of record for Farm Records.

Operator Name
RAY, CHRISTOPHER JAMES

Farm Identifier

Recon Number
2012 41045 66

Farms Associated with Operator:
3505, 3566, 4267, 4429, 4651, 4859, 5082, 5366, 6610, 5725, 6074, 8293

ARC/PLC GIP Eligibility: Eligible

CRP Contract Number(s): None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP	Farm Status	Number of Tracts
4770.68	380.54	380.54	0.0	0.0	0.0	0.0	Active	1
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP				
0.0	0.0	380.54	0.0	0.0				

PLC	ARC-CO	ARC-IC	ARC/PLC	PLC-Default	ARC-CO-Default	ARC-IC-Default
NONE	NONE	NONE		NONE	BARLEY	NONE

Crop	Base Acreage	PLC Yield	CCC-505 CRP Reduction
BARLEY	295.3	80	0.0
Total Base Acres:	295.3		

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Tract Number: 0057 Description:
FSA Physical Location: Malheur, OR ANSI Physical Location: Malheur, OR

BUA Range Unit Number:

HEL Status: HEL Determinations not complete

Wetland Status: Wetland determinations not complete

WL Violations: None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP
4770.68	380.54	380.54	0.0	0.0	0.0	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP		
0.0	0.0	380.54	0.0	0.0		

Crop	Base Acreage	CTAP/Tran Yield	PLC Yield	CCC-505 CRP Reduction
BARLEY	295.3		80	0.0
Total Base Acres:	295.3			

Owner: DANIEL OAKENS FAMILY TRUST
Other Producers: None

Application for Water Right Transfer

Evidence of Use Affidavit



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss
 County of MALHEUR)

I, CHRISTOPHER JAMES RAY, in my capacity as OWNER,

mailing address 6144 MOLTHA RANCH ROAD

telephone number (541)880-6344, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the **entire** place of use for Certificate # 56242; **OR**

My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # ____ has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: ____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # ____ (For Historic POD/POA Transfers)

(continues on reverse side)

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3. The water right was used for: (e.g., crops, pasture, etc.): _____

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

Clark Owen
Signature of Affiant

3/31/2020
Date

Clark Owen

Signed and sworn to (or affirmed) before me this 31st day of March, 2020.

Jane Reeves
Notary Public for Oregon



My Commission Expires: 6-20-23

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input checked="" type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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Photo shows crop on the Place of Use in 2019.

CCC-902 (04-16-2019)	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	Program Year 2019
FARM OPERATING PLAN FOR PAYMENT ELIGIBILITY 2009 and Subsequent Program Years		

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Part A - General Farming Operation Information

Producer's Name CHRISTOPHER J RAY	Tax ID Number and ID Type (last 4 digits) 7521 5	Business Type Individual
--------------------------------------	---	-----------------------------

Part B - Capital Information *Note: Do not include capital contributed by members of one's partnership or joint ventures (applicable for all business types)*

Does the producer provide capital to this farming operation?	Yes
What percent of capital is contributed by the producer to this farming operation from all sources?	100 %

Indicate the source of all farming capital for the producer. (Check all that apply)

- Non-borrowed capital
 Commercial loans/credit
 Other/Additional
 FSA program payments
 Private Loans/credit

Was such a loan acquired from, co-signed by, secured by, or guaranteed by an individual or entity who:	
+ shares in the production or proceeds of the production from this farming operation?	No
+ is a landowner or landlord with an interest in this farming operation?	No

Part C - Land Information *(Applicable for all business types)*

Does the producer contribute land to the farming operation?	Yes
---	-----

Does this farming operation own ANY land?	Yes
---	-----

State	Administrative County	Farm Serial Number	Tract Number	Farmland Acres	Cropland Acres	Farmland Acres Not Leased	Is any land leased to another producer?
OR	Malheur	3556	3174	241.34	182.2	241.34	No
OR	Malheur	4257	2320	478.57	272.25	478.57	No
OR	Malheur	4499	2459	452.49	279.14	452.49	No
OR	Malheur	4661	3867	873.64	424.51	873.64	No
OR	Malheur	4856	4132	41.99	0.0	41.99	No
OR	Malheur	5382	4942	507.9	0.0	507.9	No
OR	Malheur	5610	5335	141.56	40.29	141.56	No
OR	Malheur	6299	6186	7.1	0.0	7.1	No

Does this farming operation lease land from another producer?	Yes
---	-----

State	Administrative County	Farm Serial Number	Tract Number	Name of Person Land is Leased From	Leased Acres	Type of Acres	Type of Lease	Crop Share	Interest in the Land is same as last year?
OR	Malheur	3656	3173	CHARLAN A HEID EDWIN G HEID	5.8	Cropland	Cash		Yes
OR	Malheur	4692	3897	DANIEL DANENS FAMILY TRUST	380.54	Cropland	Cash		Yes
OR	Malheur			DANIEL DANENS FAMILY TRUST	4398.14	Farmland	Cash		Yes
OR	Malheur	6365	4945	JOSHUA RAY	135.53	Farmland	Cash		Yes
OR	Malheur	5725	5455	HUNTING AND GRAZING ASSOCIATION LLC	664.7	Farmland	Cash		Yes
OR	Malheur	6274	5766	DAVIS LAND & LIVESTOCK CO	11979.97	Farmland	Cash		Yes

Does this farming operation lease land to another producer?	No
---	----

Part D - Custom Services *(Applicable for all business types)*

Will custom services, such as harvesting, spraying, fertilization, tillage, seeding, etc., be utilized for this farming operation?	No
--	----

Part E - Equipment Information *Note: Do not include equipment contributed by members of general partnership or joint ventures (applicable for all business types)*

Does the producer provide equipment to this farming operation?	Yes
--	-----

What percent of the equipment does the producer contribute to this farming operation?	100 %
---	-------

Does the producer own any equipment contributed to this farming operation?	Yes
--	-----

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Oregon
Malheur

U.S. Department of Agriculture
Farm Service Agency
Abbreviated 156 Farm Record

Prepared: 11/19/19 9:47 AM
Crop Year: 2020
Page: 1 of 1

Report ID: FSA-156EZ

DISCLAIMER: This is data extracted from the web farm database. Because of potential messaging failures in MIDAS, this data is not guaranteed to be an accurate and complete representation of data contained in the MIDAS system, which is the system of record for Farm Records.

Operator Name: RAY CHRISTOPHER JAMES
Farm Identifier: [Blank]
Recon Number: 2012 41045 66

Farms Associated with Operator:
3565, 3566, 4267, 4409, 4601, 4859, 5082, 5365, 6610, 5775, 5974, 8293

ARC/PLC GIP Eligibility: Eligible

CRP Contract Number(s): None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP	Farm Status	Number of Tracts
4778.66	380.54	380.54	0.0	0.0	0.0	0.0	Active	1
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP				
0.0	0.0	380.54	0.0	0.0				

PLC	ARC-CO	ARC-IC	ARC/PLC	PLC-Default	ARC-CO-Default	ARC-IC-Default
NONE	NONE	NONE		NONE	BARLY	NONE

Crop	Base Acreage	PLC Yield	CCC-505 CRP Reduction
BARLEY	295.3	80	0.0
Total Base Acres:	295.3		

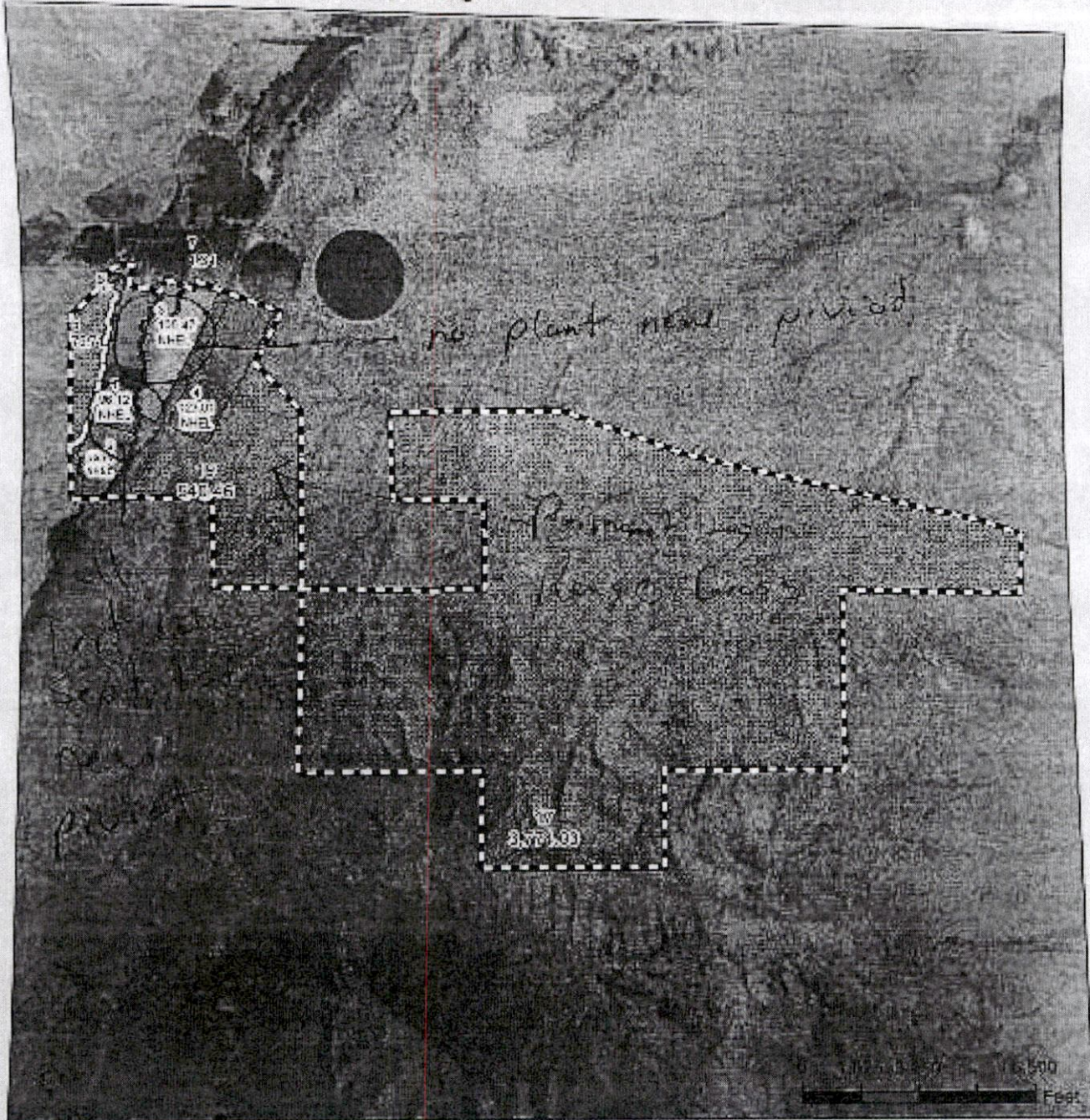
Tract Number: 3057 Description
 FSA Physical Location: Malheur, OR ANSI Physical Location: Malheur, OR
 BIA Range Unit Number:
 HEL Status: HEL Determinations not complete
 Wetland Status: Wetland determinations not complete
 WL Violations: None

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Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP
4778.66	380.54	380.54	0.0	0.0	0.0	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP		
0.0	0.0	380.54	0.0	0.0		

Crop	Base Acreage	CTAP Tran Yield	PLC Yield	CCC-505 CRP Reduction
BARLEY	295.3		80	0.0
Total Base Acres:	295.3			

Owner: DANIEL OKNEYS FAMILY TRUST
Other Producers: None



Common Land Unit

- Non-Cropland
- Tract Boundary
- Cropland
- CRP

Wetland Determination Identifiers

- Restricted Use
- Limited Restrictions
- Exempt from Conservation Compliance Provisions

①	fall	planted	critical	Sept 1st	2020	Program Year
②	11	11	11	11	11	Map Created October 02, 2019
③	11	11	11	11	11	Farm 4692
Tract Cropland Total: 380.54 acres						③ no plant
						Tract 3887

United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data as is and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA Programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS).

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Application for Water Right Transfer

Evidence of Use Affidavit



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss
 County of MALHEUR)

I, CHRISTOPHER JAMES RAY, in my capacity as OWNER,

mailing address 6144 MOLTHA RANCH ROAD

telephone number (541)880-6344, being first duly sworn depose and say:

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1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the **entire** place of use for Certificate # 33312; **OR**

My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township		Range		Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # ____ has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: ____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # ____ (For Historic POD/POA Transfers)

(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): _____

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

Chris Tom
Signature of Affiant

3/31/2020
Date

Chris Tom

Signed and sworn to (or affirmed) before me this 31st day of March, 2020.

Jane Leigh Reeves
Notary Public for Oregon



My Commission Expires: 6-20-23

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input checked="" type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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Photo shows crop on the Place of Use in 2019.

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CCC-902 (04-15-2019) U.S. DEPARTMENT OF AGRICULTURE Program Year
 Commodity Credit Corporation 2019
FARM OPERATING PLAN FOR PAYMENT ELIGIBILITY
 2009 and Subsequent Program Years

For "actively engaged in farming" and other payment eligibility and limitation determinations.

This form is to be completed by, or on behalf of, the individual or legal entity identified in Part A that is seeking benefits from the Farm Service Agency (FSA) under one or more programs that are subject to the regulations at 7 CFR Part 1400. This form collects farming and other information about the individual or legal entity that receives program benefits directly using the tax identification number identified in Part A. This form also collects information about the members of legal entities. Payment eligibility is based upon the contribution level of certain inputs to a farming operation such as land, capital, equipment, labor, and management. The information on this form will be used by FSA to determine payment eligibility and limitation of payments by direct attribution.

Part A - General Farming Operation Information

Producer's Name: CHRISTOPHER J RAY
 Tax ID Number and ID Type (last 4 digits): 7521 5
 Business Type: Individual

Part B - Capital Information Note: Do not include capital contributed by members of general partnerships or joint ventures (applicable to all business types)

Does the producer provide capital to this farming operation? Yes
 What percent of capital is contributed by the producer to this farming operation from all sources? 100 %

Indicate the source of all farming capital for the producer. (Check all that apply)

- Non-borrowed capital
- Commercial loans/credit
- Other/Additional
- FSA program payments
- Private Loans/credit

Was such a loan acquired from, co-signed by, secured by, or guaranteed by an individual or entity who:
 * shares in the production or proceeds of the production from this farming operation? No
 * is a landowner or landlord with an interest in this farming operation? No

Part C - Land Information (applicable to all business types)

Does the producer contribute land to the farming operation? Yes
 Does this farming operation own ANY land? Yes

State	Administrative County	Farm Serial Number	Tract Number	Farmland Acres	Cropland Acres	Farmland Acres Not Leased	Is any land leased to another producer?
OR	Malheur	3556	3174	241.34	182.2	241.34	No
OR	Malheur	4257	2320	478.57	272.25	478.57	No
OR	Malheur	4499	2459	452.49	279.14	452.49	No
OR	Malheur	4651	3867	873.64	424.51	873.64	No
OR	Malheur	4858	4132	41.99	0.0	41.99	No
OR	Malheur	5382	4942	507.9	0.0	507.9	No
OR	Malheur	5610	5335	141.56	40.29	141.56	No
OR	Malheur	8299	8186	7.1	0.0	7.1	No

Does this farming operation lease land from another producer? Yes

State	Administrative County	Farm Serial Number	Tract Number	Name of Person Land is Leased From	Leased Acres	Type of Acres	Type of Lease	Crop Share	Interest in the Land is same as last year?
OR	Malheur	3556	3173	CHARLAN A HEID EDWIN G HEID	5.8	Cropland	Cash		Yes
OR	Malheur	4692	3997	DANIEL DANENS FAMILY TRUST	380.54	Cropland	Cash		Yes
OR	Malheur			DANIEL DANENS FAMILY TRUST	4398.14	Farmland	Cash		Yes
OR	Malheur	5365	4945	JOSHUA RAY	135.53	Farmland	Cash		Yes
OR	Malheur	5725	5455	HUNTING AND GRAZING ASSOCIATION LLC	654.7	Farmland	Cash		Yes
OR	Malheur	5874	5766	DAVIS LAND & LIVESTOCK CO	11879.97	Farmland	Cash		Yes

Does this farming operation lease land to another producer? No

Part D - Custom Services (applicable to all business types)

Will custom services, such as harvesting, spraying, fertilization, tillage, seeding, etc., be utilized for this farming operation? No

Part E - Equipment Information Note: Do not include equipment contributed by members of general partnerships or joint ventures (applicable to all business types)

Does the producer provide equipment to this farming operation? Yes
 What percent of the equipment does the producer contribute to this farming operation? 100 %
 Does the producer own any equipment contributed to this farming operation? Yes

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FARM: 4692

Oregon
Malheur

U.S. Department of Agriculture
Farm Service Agency
Abbreviated 156 Farm Record

Prepared: 11/19/19 8:47 AM
Crop Year: 2020
Page: 1 of 1

Report ID: FSA-156EZ

DISCLAIMER: This is data extracted from the web farm database. Because of potential missing values in MIDAS, this data is not guaranteed to be an accurate and complete representation of data contained in the MIDAS system, which is the system of record for Farm Records.

Operator Name
RAY, CHRISTOPHER JAMES

Farm Identifier

Recon Number
2012 41045 66

Farms Associated with Operator:
3555, 3556, 4257, 4409, 4651, 4859, N882, 5365, 6610, 5725, 5974, 6299

ARC/PLC GMP Eligibility: Eligible

CRP Contract Number(s): None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP	Farm Status	Number of Tracts
4770.68	380.54	380.54	0.0	0.0	0.0	0.0	Active	1
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP				
0.0	0.0	380.54	0.0	0.0				

ARC/PLC

PLC	ARC-CO	ARC-IC	PLC-Default	ARC-CO-Default	ARC-IC-Default
NONE	NONE	NONE	NONE	BARLEY	NONE

Crop	Base Acreage	PLC Yield	CCC-505 CRP Reduction
BARLEY	295.3	80	0.0
Total Base Acres:	295.3		

Tract Number: 3067 Description:

FSA Physical Location: Malheur, OR

ANSI Physical Location: Malheur, OR

BA Range Unit Number:

HEL Status: HEL Determinations not complete

Wetland Status: Wetland determinations not complete

WL Violations: None

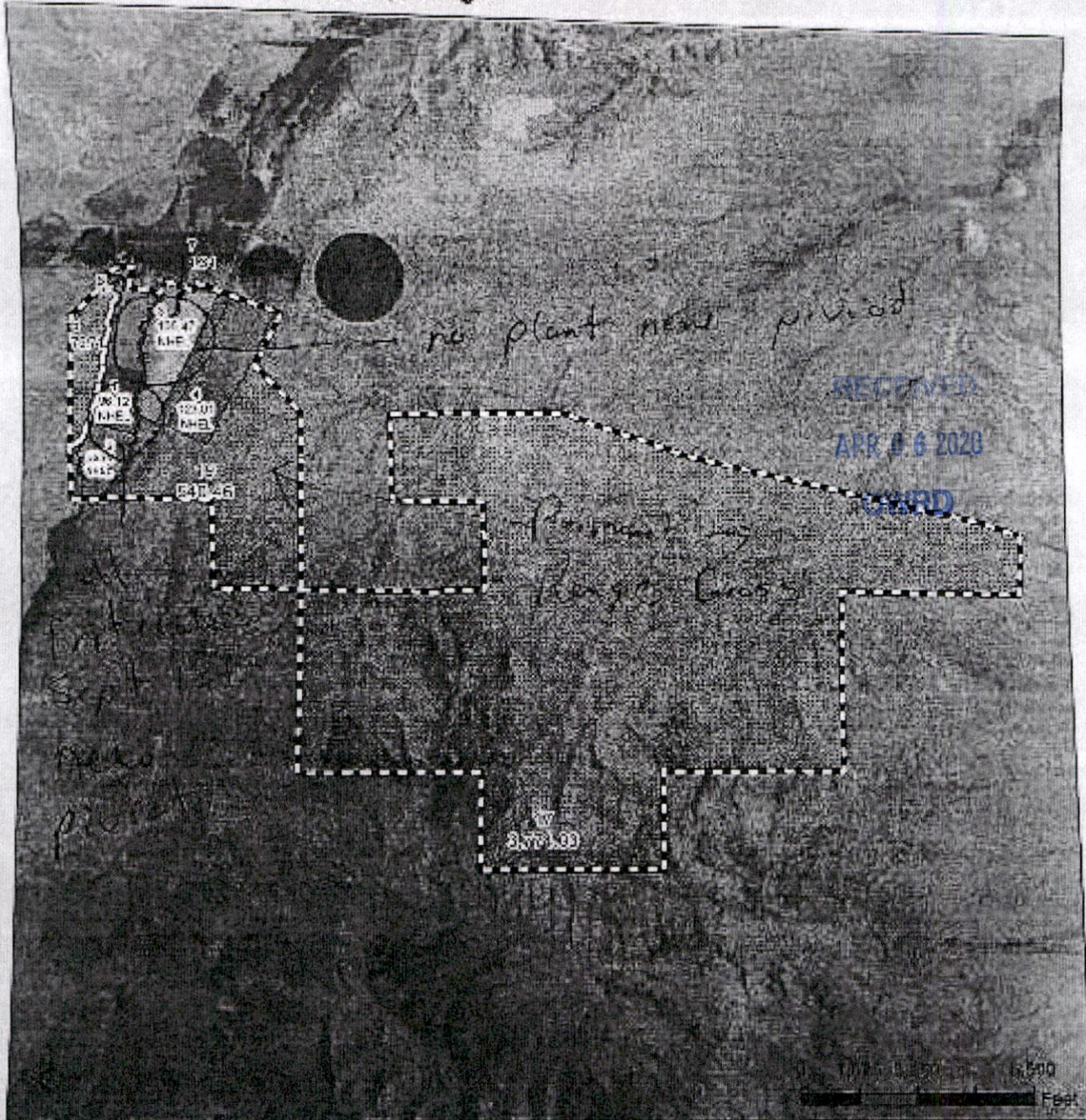
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Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP
4770.68	380.54	380.54	0.0	0.0	0.0	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP		
0.0	0.0	380.54	0.0	0.0		

Crop	Base Acreage	CTAP Tran Yield	PLC Yield	CCC-505 CRP Reduction
BARLEY	295.3		80	0.0
Total Base Acres:	295.3			

Owners: DANIEL OAKENS FAMILY TRUST

Other Producers: None



Common Land Unit

- Non-Cropland
- Cropland
- Tract Boundary
- CRP

Wetland Determination Identifiers

- Restricted Use
- Limited Restrictions
- Exempt from Conservation Compliance Provisions

①	fall	planted	critical	Sept 1st	2020	Program Year
②						Map Created October 02, 2016
③						Farm 4692
						Tract 3887

Tract Cropland Total: 380.54 acres ③ no plant

United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on the data outside FSA Programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS).

FARM: 4692

Oregon
Malheur

U.S. Department of Agriculture
Farm Service Agency
Abbreviated 156 Farm Record

Prepared: 11/19/19 8:47 AM
Crop Year: 2020
Page: 1 of 1

Report ID: FSA-156EZ

DISCLAIMER: This is data extracted from the web farm database. Because of potential messaging failures in MIDAS, this data is not guaranteed to be an accurate and complete representation of data contained in the MIDAS system, which is the system of record for Farm Records.

Operator Name: RAY CHRISTOPHER JAMES
Farm Identifier: [Blank]
Recon Number: 2012.41045.66

Farms Associated with Operator:
3365, 3366, 4257, 4409, 4651, 4859, 5182, 5366, 6610, 5725, 5974, 6293

ARC/PLC/GIP Eligibility: Eligible

CRP Contract Number(s): None

Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP	Farm Status	Number of Tracts
4770.62	380.54	380.54	0.0	0.0	0.0	0.0	Active	1
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP				
0.0	0.0	380.54	0.0	0.0				

PLC	ARC-CO	ARC-IC	ARC/PLC	PLC-Default	ARC-CO-Default	ARC-IC-Default
NONE	NONE	NONE		NONE	BARLY	NONE

Crop	Base Acreage	PLC Yield	CCC-595 CRP Reduction
BARLEY	295.3	80	0.0
Total Base Acres:	295.3		

Treat Number: 3967 Description: [Blank]
 FSA Physical Location: Malheur, OR ANSI Physical Location: Malheur, OR
 BIA Range Unit Number: [Blank]
 HEL Status: HEL Determinations not complete
 Wetland Status: Wetland determinations not complete
 WL Violations: None

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Farmland	Cropland	DCP Cropland	WBP	WRP/EWP	CRP Cropland	GRP
4770.62	380.54	380.54	0.0	0.0	0.0	0.0
State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	MPL/FWP		
0.0	0.0	380.54	0.0	0.0		

Crop	Base Acreage	CTAP Tran Yield	PLC Yield	CCC-595 CRP Reduction
BARLEY	295.3		80	0.0
Total Base Acres:	295.3			

Owner: DANIEL DANENS FAMILY TRUST
Other Producers: None

CCC-902
(04-16-2019)U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

Program Year

FARM OPERATING PLAN FOR PAYMENT ELIGIBILITY
2009 and Subsequent Program Years

2019

For "actively engaged in farming" and other payment eligibility and limitation determinations.

This form is to be completed by, or on behalf of, the individual or legal entity identified in Part A that is seeking benefits from the Farm Service Agency (FSA) under one or more programs that are subject to the regulations at 7 CFR Part 1400. This form collects farming and other information about the individual or legal entity that receives program benefits directly using the tax identification number identified in Part A. This form also collects information about the members of legal entities. Payment eligibility is based upon the contribution level of certain inputs to a farming operation such as land, capital, equipment, labor, and management. The information on this form will be used by FSA to determine payment eligibility and limitation of payments by direct reimbursement.

Part A - General Farming Operation Information

Producer's Name	Tax ID Number and ID Type (last 4 digits)	Business Type
CHRISTOPHER J RAY	7521 5	Individual

Part B - Capital Information. Note: Do not include capital contributed by members of general partnership or joint ventures (applicable to all business types).

Does the producer provide capital to this farming operation? Yes

What percent of capital is contributed by the producer to this farming operation from all sources? 100 %

Indicate the source of all farming capital for the producer. (Check all that apply)

- Non-borrowed capital
 Commercial loans/credit
 Other/Additional
 FSA program payments
 Private Loans/credit

Was such a loan acquired from, co-signed by, secured by, or guaranteed by an individual or entity who:

+ shares in the production or proceeds of the production from this farming operation? No

+ is a landowner or landlord with an interest in this farming operation? No

Part C - Land Information (applicable to all business types)

Does the producer contribute land to the farming operation? Yes

Does this farming operation own ANY land? Yes

State	Administrative County	Farm Serial Number	Tract Number	Farmland Acres	Cropland Acres	Farmland Acres Not Leased	Is any land leased to another producer?
OR	Malheur	3556	3174	241.34	182.2	241.34	No
OR	Malheur	4257	2320	478.57	272.25	478.57	No
OR	Malheur	4499	2458	452.49	278.14	452.49	No
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OR	Malheur	4858	4132	41.99	0.0	41.99	No
OR	Malheur	5382	4942	507.9	0.0	507.9	No
OR	Malheur	5610	5335	141.58	40.29	141.58	No
OR	Malheur	8299	8186	7.1	0.0	7.1	No

Does this farming operation lease land from another producer? Yes

State	Administrative County	Farm Serial Number	Tract Number	Name of Person Land is Leased From	Leased Acres	Type of Acres	Type of Lease	Crop Share	Interest in the Land is same as last year?
OR	Malheur	3556	3173	CHARLAN A HEID EDWIN G HEID	5.8	Cropland	Cash		Yes
OR	Malheur	4692	3887	DANIEL DANENS FAMILY TRUST	380.54	Cropland	Cash		Yes
OR	Malheur			DANIEL DANENS FAMILY TRUST	4398.14	Farmland	Cash		Yes
OR	Malheur	5365	4945	JOSHUA RAY	135.53	Farmland	Cash		Yes
OR	Malheur	5725	5455	HUNTING AND GRAZING ASSOCIATION LLC	654.7	Farmland	Cash		Yes
OR	Malheur	5974	5766	DAVIS LAND & LIVESTOCK CO	11979.97	Farmland	Cash		Yes

Does this farming operation lease land to another producer? No

Part D - Custom Services (applicable to all business types)

Will custom services, such as harvesting, spraying, fertilization, tillage, seeding, etc., be utilized for this farming operation? No

Part E - Equipment Information. Note: Do not include equipment contributed by members of general partnership or joint ventures (applicable to all business types).

Does the producer provide equipment to this farming operation? Yes

What percent of the equipment does the producer contribute to this farming operation? 100 %

Does the producer own any equipment contributed to this farming operation? Yes

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Photo shows crop on the Place of Use in 2019.

3. The water right was used for: (e.g., crops, pasture, etc.): _____

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

Clayton Sam
Signature of Affiant

3/31/2020
Date

3/31/2020

Signed and sworn to (or affirmed) before me this 31st day of March, 2020.

Cabell R. Reeves

Jane Leigh Reeves
Notary Public for Oregon



My Commission Expires: 6-20-23

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input checked="" type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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Application for Water Right Transfer Evidence of Use Affidavit



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss
County of MALHEUR)

I, CHRISTOPHER JAMES RAY, in my capacity as OWNER,

mailing address 6144 MOLTHA RANCH ROAD

telephone number (541)880-6344, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the **entire** place of use for Certificate # 48389; **OR**

My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # _____ has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____ (For Historic POD/POA Transfers)

(continues on reverse side)

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